



Lead Training Provider Recognition Form LPF-4

Louisiana Department of Environmental Quality
OES, Public Participation and Permit Support Division
Notifications and Accreditations Section
P.O. Box 4313, Baton Rouge, LA 70821-4313
Phone (225) 219-3300 Fax (225) 325-8282

For LDEQ Use Only
Expires:
Check No.
Check Date:
Amt Received: \$
Processed Date:

Fees: In State: \$500 Out of State: \$750 Trainer Provider Recognition No. _____ Agency Interest No. _____

I. Applicant Information: (please print or type)

Company Name:	Email Address:	
Training Manager:	Title:	State ID or Driver's License No.
Business Address:	State of Issuance of State ID No.	
City:	State:	Zip:
Phone No.()	Fax No.()	Web Address:

II. Are you recognized or approved by any other state to teach lead courses? ☐ Yes ☐ No

If yes, specify state and name of company: _____

III. Check discipline(s) for which company is seeking recognition:

☐ Initial ☐ Refresher If Refresher, Date of Expiration Required: _____

☐ Worker ☐ Supervisor ☐ Inspector ☐ Risk Assessor ☐ Project Designer

List location(s) and description of facilities where course(s) will be offered. (Must be a classroom setting to qualify)

IV. Description of equipment available for hands-on-training: _____

V. List the names of the principal instructors and contact information:

Name	Telephone No.	Email Address
_____	() _____	_____
_____	() _____	_____

VI. Submit application materials and appropriate fees to the address above with the following information:

1. An example of numbered certificates;
2. Copy of test blueprint;
3. A description of the procedures for conducting the assessment of hands-on skills;
4. Course curriculum materials for review if not using EPA-authorized training materials; and
5. Copy of the quality control plan.

****ALL FEES ARE NON-TRANSFERABLE AND NON-REFUNDABLE**

VII. Statements of Regulation Knowledge and Acknowledgment for Public Records:

- (a) I hereby certify that this notification is true and accurate and that all information provided complies with Chapter 28 requirements: The training provider meets the minimum requirements established in LAC 33.III.2805.B; Each instructor meets the qualifications described in LAC 33.III.2805.B.2; and EPA-authorized model training materials will be used or course materials will be submitted for agency approval.
- (b) I hereby certify that this application, accompanying documents, and information provided is true and accurate in accordance with La. R.S. 30:2025.F(2)(a), any person who willfully or knowingly makes any false statement, representation, or certification in any form, application, record, label, manifest, report, plan, or other document filed or required to be maintained under this Subtitle are subject to penalties with conviction of civil and criminal actions as outlined in this regulation.
- (c) I acknowledge that the information I have provided on or with this form is to be kept in the public records maintained by LDEQ. I also acknowledge that the information will be available for public inspection and copying, and I waive any claim to privacy in this information.

(Signature of Training Manager/Responsible Individual)

(Print Name)

(Date)